# **MINUTES**

## **Wisconsin Minority Health Leadership Council (WMHLC)**

Thursday March 14, 2013
Catholic Multicultural Center
1862 Beld Street, Madison, WI 53713
9:30 a.m. – 3:00 p.m.

#### **Members Present:**

Paulette Bangura - Faculty Associate, UW-Milwaukee School of Continuing Education
María Barker - Multicultural Programs Manager, Planned Parenthood of Wisconsin, Inc.
Brenda Coley - Director of Adult Services, Diverse & Resilient, Inc. (Chair)
Inshirah Farhoud - Pediatric Nurse Practitioner, Children's Hospital of Wisconsin
Carla Harris - Oncology Community Outreach Coordinator, Columbia-St. Mary's
Sarah Noble - Managing Director, Reproductive Justice Collective
Nancy Saiz - Grants Administrator, City of Madison
Ana Paula Soares Lynch - Director, Proyecto Salud, CORE/El Centro
Fuechou Thao - Public Health Aide, Madison & Dane County Public Health
JoCasta Zamarripa - State Representative

#### **Excused:**

**Emmanuel Ngui** - Asst. Professor of Health Disparities, UW-Milwaukee School of Public Health

#### Absent:

**Koua Vang** - Executive Director, United Asian Services of Wisconsin, Inc. **Lisa Tiger** - Collaborative Center for Health Equity (notified Program of emergency)

#### Staff:

Evelyn Cruz, Director, Minority Health Program
Ruth DeWeese, Minority Health Program Assistant
María M. Flores, Minority Health Program and Policy Analyst
Kris Freundlich, DHS Strategic Planning Consultant / Facilitator

#### **ACRONYMS**

ACA Affordable Care Act

WMHLC Healthiest Wisconsin 2020

Wmhlc Minority Health Leadership

WMHLC Minority Health Leadership Council
MHP Wisconsin Minority Health Program
OMH Federal Office of Minority Health

NPA National Partnership for Action to End Health Disparities

Meeting commenced at 9:47a.m. with no quorum. December minutes reviewed.

## **ACA FACT SHEET**

Sarah Noble

The charge at the December meeting was to develop a communications mechanism of some kind around BadgerCare and the Affordable Care Act (ACA), in support of the low-income communities which will be affected the worst. Sarah has been working with the <a href="Save BadgerCare Coalition">Save BadgerCare Coalition</a> to get information out.

- We cannot get a fact sheet out until all the facts are in.
- We may think about making 2 fact sheets one for the community, one for advocates.

A member asked a question about BadgerCare and the ACA, and the restrictions on Medicaid – how are they related.

- The Governor is increasing BadgerCare for childless adults, but decreasing eligibility for adults with children; those parents should be picked up by the ACA;
- The ACA is tied to state-level medical health benefits.

Sarah believes in giving people just enough information.

- Giving out a fact sheet will help people become involved in advocacy.
- One thing that people need to understand first and foremost is what is BadgerCare.
- What will ACA do in very simple language.
- Give people a timeline when to expect changes.
- Give people links to where they can get more information, for example ABC for Health.

One member stated that we need to help people understand the Wisconsin Health Insurance Marketplace. Also policy issues; there are changes that people need to understand. Policy issues should be given to advocates, not necessarily to the public. The idea for the fact sheets is to have three things people need to know in each area, because there is too much information to put on one sheet.

It is a huge task to take the convoluted language and make it simple to understand. One member understands that the legislature is making inroads into firming up the language.

- Discussion around reaching illiterate or non-English speaking folks has not yet started.
- Health Promoters really need to be knowledgeable about these issues.

One member brought up the issue if the Council could be part of the Save BadgerCare Coalition:

- One of the goals in the Council's Strategic Plan is partnerships.
- The Save BadgerCare Coalition needs more people of color.
- One member mentioned that a group called the Wisconsin Communities of Color Agenda should be revived; in the past Minority Health Program grantee Freedom, Inc. has partnered with this group, which is very grassroots.

People need to see that they should enroll in BadgerCare, even if it is closed. By enrolling it gives more scope to the issue and to the need for BadgerCare.

One member asked if BadgerCare was the same as Medicaid? It is a Medicaid *program*. This is why definitions are vital to give to the community, so that when these terms come out, they know what it is. Also, it is important to note effective dates on a fact sheet - some people think all of the ACA has gone into effect, and it has not.

Reproductive Justice Collective literature examples were passed around – not about BadgerCare, but just examples of the type of lit pieces they produce.

One member asked if the fact sheets will need to be continually updated. Sarah said her intent is not to print something that will continually need to be updated.

#### **NEXT STEPS:**

- creation of one fact sheet, with information on what is known/definite now, perhaps it could be just definitions and dates.
- This might be the first fact sheet. Later on, something else can be produced. The idea is to get this "fact sheet" in the hands of the advocates.
- A communication work plan is good, and we can connect to those entities that can be successful.

Perhaps the piece can be ready at the June meeting. Brenda affirmed that the goal is to have the piece ready for the Council by the June meeting. The beginning piece will be ready by early April and will be shared with the group. By June the final piece should be ready.

Evelyn Cruz stated that information dissemination around the ACA is a priority of the Federal Office of Minority Health (OMH). The Region V Health Equity Council will be helping to strategize on this. She is willing to be point of contact to start gathering information.

### REGION V DIRECTOR COMMUNICATION

One member was going to begin drafting the letter to Director Kenneth Munson. The group is to come up with the points of the letter. Kris Freundlich reminded the group about the two points discussed in the December meeting:

- The Council wants to be acknowledged about being a resource and perhaps inform him about the April 13 event;
- Questions that were in the December minutes.

Evelyn Cruz stated that the Program can draft a letter and take it to the Executive Committee. The Executive Committee will convene within the next few weeks. An invitation can be put to him to meet with the Council - perhaps for the June meeting.

- One member suggested that perhaps the Region V HE Council be part of this letter also.
   They meet often.
- It was decided that the letter will be a joint letter from the Council AND the Region V HE Council.

One member asked if the Council could weigh in on a letter to the Governor asking him to reconsider about how Medicaid was not expanded. The Council agreed to write a letter to the

Governor. This member's office will draft the letter; it will be sent to the Council for review. *The draft letter to the Governor was sent to the Council on April 5.* 

One member stated that an open letter to the Governor via a Letter to the Editor would be powerful; perhaps get some media coverage. Another member stated that catching them off quard would not be fair.

One member asked if we could contact a health reporter to interview Council members. It would show that people of color are discussing these issues and may give traction to our cause.

Lunch

### **MINUTES**

- Fuechou Thao moves to approve.
- Inshirah Farhoud seconded.
- Nancy Saiz the minutes should reflect that she was not at the December meeting.

## Invitation to Brett Davis – DHCAA

Review of March 2012 meeting minutes with Brett Davis.

Goal of June 2013 meeting:

- Communicate with Brett Davis our concerns with implementing ACA
- Advocacy letting him know what the needs of the different populations are
- We want him to know what the negative consequences are from not giving enough information to the community. The state government has the responsibility to communicate and give a timeline of what the plan is; they have a responsibility to the community.

One member stated that perhaps we should copy Brett Davis on the letter to the Governor. Another member stated that the Save BadgerCare Coalition has a meeting with Administrator Davis in his office in April. A letter with issues and questions can be drafted after that meeting.

One member stated that she has more questions than answers whenever she comes to a meeting. For example, how to get information to train and communicate to health promoters. Another member stated that we should be realistic in when to expect a response - we need something from him by the end of the summer. It was asked if the Council should notify him in advance of the questions or issues we would like to discuss; it was agreed that we should send him a list of issues we want to talk about. Another member stated that when we make the request through the MHP, we should attach a list of questions to the invitation. Some of his answers may be tied to the state budget.

Council members agreed to copy both Brett Davis and Kitty Rhoades on the letter to the Governor.

The talking points for Brett Davis will be drafted by the MHP and sent to the Executive Committee: what is going on with ACA implementation, people are owed time to understand implications, etc.

Administrator Davis is not available for the June meeting; he will be present in September.

# **REGION V HEALTH EQUITY COUNCIL**

Ana Paula Soares Lynch

Ana Paula stated that the Awareness Subcommittee of the Council chose events. The event for Wisconsin will be April 13, in Milwaukee, and will focus on health promoters.

- The ACA & NPA will be focus of meeting.
- What she has seen is health professionals talking about health promoters, not
  necessarily health promoters talking about themselves. This event is a chance for
  health promoters to talk about themselves amongst themselves and also to health
  professionals. This is a unique connection to the community. The health promoters
  have a role in eliminating health disparities. There should be a focus on the
  professionals also; to talk about solutions, not issues. This is a chance to give a broader
  picture about what is happening locally and nationally.
- There will be breaking ice activities, getting-to-know-you activities. It is not really a "conference", more of a gathering. It will be a good opportunity to start something and to work together between communities.
- The Minority Health Program will help connect to regional offices.
- Brainstorming around possible invitees and feedback of the program itself. How to frame the day in a way for the professionals to understand the roles of the health promoters.
- The April 13 event would be a good opportunity to let the community know that the Region V HE Council exists, and the MHLC Council exists.
- How can have community members understand what we do? We have to give them points on what we do.
- Some of the points are:
  - We have a number of health disparities in this community, and they affect how long we live.
  - We try to bring resources to eliminate these health disparities, we talk with lawmakers, and we help lawmakers craft health policies.
  - We have *HW2020* that organizations can use to decide what money to go after.
  - o We impact this process, we are advocates, we are the middlemen.

One member discussed the Planned Parenthood Conference with a Health Promoter focus: <u>Safe Healthy Strong 2013</u> April 29-May 3.

- The Health Promoter focus takes place April 29-30.
- April 29 for managers of CBOs on how to start a community health worker program, and how other organizations are using health promoters. They will have an evaluation portion also.
- April 30 Professional Development Day. Focus is on the ACA, Health Navigators and a formal certificate program at UW-Madison; recognizing people's needs outside of our own agenda. How can health promoters be savvy enough? Includes storytelling.

- The MHP will send out the materials.
- It will take place at the Pyle Center in Madison. The cost is  $\sim$  \$200.
- The DPH Workforce Development Director may want to see this and perhaps attend.

The new quarterly Planned Parenthood magazine was passed around; the MHLC could possibly contribute content to this magazine.

This conference is important for the two groups: health care professionals and health promoters. It allows them to caucus together, to let each other's group know who they are. The Promoters need to realize how impactful they are in the community, they are equal partners in the community, and truly the eyes and ears in the community.

How can a movement arise from the health promoters being a fringe group to them being a central part of the health care system? How can the voice of this Council move them to a higher level? Perhaps a good place to start could be with Region V Director Kenneth Munson.

We need to be truthful – the way health promoters are treated is not equal. There needs to be some acknowledgement about the impact on people's lives and how it can go a long way.

# **SHARING BEST PRACTICES:** <u>Acceptance Journeys</u>

Brenda Coley

This project was started initially to address the health disparities of African-American men and HIV. Since 2002, 1 in 4 African-American men are HIV-positive. In 2009, the CDC came to Milwaukee to investigate a spike in HIV infection in young (13-29) African-American males.

In response to this, Diverse & Resilient has used story-telling (a proven and evidence-based method) to chip away at anti-gay discrimination. "Acceptance Journeys" has built a public and multi-pronged approach. One of those is a pack of cards with public and private individuals' pictures with their loved ones, and the straight person telling their story of acceptance. The other public approach is billboards with a message of love and acceptance. Brenda passed out the "Acceptance Journeys" packet of story cards, and the Council discussed them.

### **WRAP UP**

- The issue of term limits arose. There are no term limits, and this is an issue that the Council may wish to revisit. María M. Flores will put members' term start year on the term limits sheet that came with the agenda packet, and explain the two vacant seats. The other five seats are up for re-election to a three-year term.
- One member expressed that stated that the Council needs a complementary team with not too much representation in any one area. The Council lacks men, and we may need people in other areas outside of community-based organizations to diversify the leadership. For example, an administrator of healthcare system, legal system, etc.
- The two term vacancies (Evelyn and Tina Jacobsen) are filled according to the time left. For example Evelyn's post will be a 2-year term because a new person will be voted in (or choose to be re-elected) to take her place.
- The Council discussed names of people that they would contact for nominations.

• Brenda stated that a final date set to get in nominations will be discussed in the Executive Committee debriefing.

Council members need to talk to potential nominees ASAP.

- Members will try to get a list to the Program by the first week of April.
- María M. Flores will send a form letter to Council members so they can start inviting people. *Sent March 15*.
- Members must stress to nominees what it means to get on this Council, responsibilities.

#### Other:

- Brenda is resigning from her leadership position and the Council.
- Carla wanted to make a correction on minutes: She will talk to María Flores about this soon. *Resolved*.

Inshirah expressed that her schedule is tight for Executive Committee meetings. Tuesday afternoons she is typically free.

## **Next Executive Committee: Tuesday April 2 – 2:00 – 3:00**

Appreciation: minutes, productive meeting, very efficient, appreciates frank conversations, appreciative to be back in the Program, taking it all in, hard work the Council did, how we think about our communities, good humor, people speaking their minds, appreciates support, appreciates similar mindsets, enjoys being in the space with the Council members and enjoys perspectives, has a like for the people on the Council, likes the coming together to make the impossible possible, sad about Brenda – she has brought time and effort to the Council, incredibly and profoundly productive, positive space created together, there are big shoes to fill for Brenda, appreciates the issues spoken about.

Next meeting is the second Thursday of June; elections will take place.